									Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2001												74		
_		CLAIMS A	AS FILED (Colum		(Column 2)			SMALL ENTITY TYPE		ITITY	OR	OTHE	R THAN ENTITY	
TOTAL CLAIMS			94					RATE	1	FEE	7	RATE	FEE	
F	FOR		NUMBER FILED		NUMBER EXTRA			BASIC F	EE	370.00	OR	BASIC FEI	740.00	
TOTAL CHARGEABLE CLAIMS			044 minus 20=		*. ¥			X\$ 9=		ALCO TO THE PARTY OF THE PARTY	OR	X\$18=		
INDEPENDENT CLAIMS			minus 3 =		*	*		X42=			OR	X84=	1	
MULTIPLE DEPENDENT CLAIM P			PRESENT				+140=			OR	+280=			
* If the difference in column 1 is less than zero					"0" in	column 2	į	TOTAL	-		OR	TOTAL		
CLAIMS AS AMENDED - PART II									L	N	10	OTHER	THAN	
	(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST							SMAL	LE	NTITY	OR	SMALL	ENTITY	
AMENDMENT A.		CLAIMS REMAINING AFTER AMENDMENT		NUME PREVIO	BER WSLY	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
MON	Total	. 73	Minus	9	4	=		X\$ 9=			OR	X\$18=		
AME	Independent	<u> 1. 5</u>	Minus	***	+	=		X42=	7	,	OR	X84=		
لبنا	FIRST PRES	ENTATION OF M	OLTIPLE DE	PENUENI	CLAIN		`	+140=		** . #r 19-	OR	+280=	,	
							L	TOTAL			OR ,	TOTAL ADDIT. FEE		
	•	(Column 1)		(Colum		(Column'8)		DD11.1 C				10011.1 CC		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	T	ADDI- IONAL FEE		RATE	ADD! TIONAL FEE	
\ <u>\</u>	Total	.76	Minus	** Q!	4_	E	1	X\$ 9=			OR	X\$18=		
	Independent	· ~	Minus	***	7	=		X42=			OR	X84≈	86	
	PHESE	ENTATION OF MU	CHPLE DE	PENDENT	CLAIM			+140=		3	OR	+280≈		
									L		OR A	DDIT. FEE	α	
•		(Column 1)		(Colum Highe		(Column 3)	_	الور المهينات ال		بينيي	-	-		
AMENDINEN! C		REMAINING AFTER AMENDMENT		NUMBI PREVIOU PAID FO	er Jsly	PRESENT EXTRA		RATE	TI	DDI- ONAL FEE		RATE	ADDI- TIONAL FEE	
	lotal .	•	Minus	**		=		X\$ 9=			OR	X\$18=	- 1	
	ndependent		Minus	***		=		X42=			OR	X84=		
1	IRST PRESE	NTATION OF MU	LTIPLE DEF	PENDENT (CLAIM		-		-	14	r	+280=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									_	(`	OR L	+280=		
**If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ADDIT. FEEOR														
Th	e "Highest Num	ber Previously Paid	For" (Total or	Independent) is the i	highest number t	ound	in the ap	prop	riate box i	in colum	nn 1.	. [

FORM PTO-875 (Rev. 8/01)